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PTO/SB/31 (06-03)

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 01AB055/ALBRP214USA						
<p>I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being sent via facsimile to: (571) 273-8300, "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" on <u>March 9, 2006</u></p> <p><u>[Signature]</u></p> <p>Typed or printed name <u>Himanshu S. Amin</u></p>		<p>In re Application of Anthony J. Cachat, et al.</p> <table border="1"> <tr> <td>Application Number <u>10/020,157</u></td> <td>Filed <u>December 7, 2001</u></td> </tr> <tr> <td colspan="2">For SYSTEM AND METHOD FOR FUNCTION BLOCK I</td> </tr> <tr> <td>Art Unit <u>2121</u></td> <td>Examiner <u>Ronald D. Hartman Jr.</u></td> </tr> </table>	Application Number <u>10/020,157</u>	Filed <u>December 7, 2001</u>	For SYSTEM AND METHOD FOR FUNCTION BLOCK I		Art Unit <u>2121</u>	Examiner <u>Ronald D. Hartman Jr.</u>
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<p>Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.</p> <p>The fee for this Notice of Appeal is (37 CFR 1.17(b)) \$ <u>500.00</u></p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ <u>_____</u></p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-1063</u>. I have enclosed a duplicate copy of this sheet.</p> <p><input checked="" type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.</p>								
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<p><u>[Signature]</u> Signature</p> <p><u>Himanshu S. Amin</u> Typed or printed name</p> <p><u>(216) 696-8730</u> Telephone number</p> <p><u>March 9, 2006</u> Date</p>								
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below".</p>								

<input type="checkbox"/> Total of <u>1</u> forms are submitted.

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